File with:

Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Disclosure Board			(2)		es
510 E. 12 th , Ste. 1A Des Moines, Iowa 50319	FOR INSTRUCTION	ONS, SEE BACK OF FORM	- 15 - 17 -	AMPAIGN IN	ICS AND
Fax: 515-281-4073	DISCLOSURE	SUMMARY PAGE	•		MAN THE SECTION
COMMITTEE NAME (Must b	oe same as on Statement of Org	ganization)		^{UU8} MAY 15	AM 9: 05
				1 011111	1
Wear For	Super Vis	or		DR-2	DISCLOSURE
(1)Statewide/Legislative/Judge	Standing for Retention Candidate	(2)State PAC (3)State Party	1 1	Rev. 07/2007)	REPORT
(4)County Central Committee (Subdivision Candidate (8)Cour	5)County Candidate (6)City Cand onty PAC (9)City PAC (10)Schoo	didate(7)School Board or Other Politica I Board or Other Political Subdivision PA0	al C (E	or Office Use O	nly
11) Local Ballot Issue				Comm. #	
CANDIDATE COMMITTEES	ONLY:	Daliticat Dark (if applicable)	1 1		·
Candidate Name	Mesa	Political Party (if applicable)	1 1		
Larry N.	vrear	<u>Democrat</u>			
Office Sought	Wear r	District (if Senate or House)		ludited	
Supervisor					
Late reports are subject to poss	sible civil and criminal penalties. F	Pursuant to Iowa Code sections 68B.32	A(7) and 68	8A.401(3), the c	andidate, for a
_					
Marini &	la har large	310-840 1532		5/13/2	208
SIGNATURE OF PERSON FI	LING REPORT	<i>319-849-1532</i> TELEPHONE	_	5/13/2 DATE:	SIGNED
<u> </u>					
I AM FILING A May	19, 2008	REPORT FOR (1) ELECTION	1/(<u>2)N</u> ON	-ELECTION Y	EAR.
0 (report date)	Indicate by	#		
☐CHECK IF AMENDMENT	TO REPORT DATED		Local Con	nmittees, enter D	ate of Election
			1 0	une 3	
	nation) report and attach Notice		County &	Local Committee	es, enter County in
(You must continue	to file reports until a DR-3 is file	ed.)	1	ction is held	
				inn	· · · · · · · · · · · · · · · · · · ·
STATE	MENT OF CASH ON HAN	ID			
	nning of the reporting period. (T				
committee. This am	nount MUST be the same as the	e cash on hand at the end first report filed.)	¢		_
		mstreport med./	Ψ		
	EY TAKEN IN THIS PERIOD	المراجعة الم		1	10.00
		dule A) (*also see in-kind below)			00.00
	,	e F)		<u> </u>	
	, , , , , ,	tach Schedule H)	•••••		
(Schedule	H applies to Candidates' Con			2 11	
		SUB-TOTAL	\$	<u> </u>	10.00
	MONEY SPENT THIS PERIO				
•	•	3) (**also see debts and loans below)		76	2.00
Schedule F: Loan F	Repayments total (Attach Sched	lule F)			
CASH ON HAND at the end of	of this reporting period (if final re	eport balance must be zero)	\$	194	48.00
**UNPAID BILLS (From Sche	edule D - Attach Schedule D)		\$		
		edule E)			
		dule F)		250	00.00
CONSULTANT BREAKDOW		· /	······································	YES	
CANDIDATE COMMITTEES					
	PERTY (From Schedule H - At	tach Schedule H)	\$		
STATE COMMITTEES: Sub	mit a reconciled campaign acco	ount bank statement in January of ea	un year.		

For Instructions, See Back of Form

org

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Reset Form

SCHEDULE	
Α	٨
(Rev. 07/03)	

MONETARY RECEIPTS

CHECK THIS BOX IF
AMENDING FORM

Wear For Si	iper VISOr		
STATE CANDIDATES NOTE: IF A CONT NUMBER AND THE PAC CHECK NUMBER DISCLOSURE BOARD.	RIBUTION IS RECEIVED FROM A STATE PAC (PO IN THE DESIGNATED COLUMN. A LIST OF ID NUM	DLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION MBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPA	ON AIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
4/9/08	CK# 30/2	David E. Hanneman 901 E. Green St. Center Point, IA. 52213		\$ 50.00	
4/11/08	CK# Cash	Doris Dufoe 104 State St. Canter Print, ta 52213		70.00	
4/22/08	ID# CK# 1228	Lindsey A. Starmer 1360 Daleview Dr. Unit 2 Marion, IR 52302-5291	Daughter	50.00	
5/13/08	CK# 2477	Julie M. Stephens 317 EAST Terrace Dr. Center Point, IA. 52213		40.00	
_	ID# CK#				
	ID#				
	ID# CK#				

332 .3...2

TOTAL (if last page of this schedule)

\$ 210.00

Page / of / (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

200000	National Control	Value Control	riving at any
3 563		200	COCHES TO SERVICE TO S
23/32	S 44. 41	悪みむ	23 £ 5022 .
25.000	37/37/2017		SEAS SEE

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

(Rev. 07/03) MONETARY EXPENDITURES

SCHEDULE

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

CHECK THIS BOX IF AMENDING FORM

COMMITTE	E NAME (Must be	same as on Statement of Organization)		
Wea		Supervisor		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4/22/08		505an Wear 5006 Rose berry Rd. Center Point, IA. 52213	Yard Signs	\$ 762.80
	ID# CK#			
THIS DOY AS			SUB-TOTAL TOTAL (if last page of this schedule)	\$ 762.00 \$ 762.00
I LIS ROY YES	LIES TO CANDIDA	TES' COMMITTEES ONLY:		

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	_ /	of	/
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FOR INSTRUCTION	ONS, SEE BACK OF FORM	a indi	SCHEDULE	
COMMITTEE NAI	ME(Must be same as on Statement of Organization)		F LOAN	
Wear	for Super Visor		(Rev. 02/08) RECEI & REP/	
IOTE: This sched	ule reports money loaned to the committee which is deposited in the OANS FROM LAST REPORTING PERIOD \$	committee account.	CHECK THIS BO AMENDING FOR	
ARTI - MONET	ARY LOANS RECEIVED THIS REPORTING PERIOD source of loan, such as a bank, must be shown if a third party is invol	ved. Include loans from candida	ate's personal funds.)	
DATE RECEIVED (MM/DD/YR)	ARY LOANS RECEIVED THIS REPORTING PERIOD source of loan, such as a bank, must be shown if a third party is invol NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	Ned. Include loans from candida RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN	
DATE RECEIVED (MM/DD/YR)	source of loan, such as a bank, must be shown if a third party is invol NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO	AMOUNT OF LOAN	
DATE RECEIVED (MM/DD/YR)	source of loan, such as a bank, must be shown if a third party is invol NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	AMOUNT OF LOAN	

TOTAL (PART I)	

\$ 2500.00

PART II - MONETARY LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PERIOD (Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL CASH REPAYMEN	ITS (PART II)	\$
From Schedule E TOTAL LOANS F		\$
TOTAL OUTSTANDING LOANS END OF REPO	ORT PERIOD	\$ 2500.00
"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.	Page	